## SEST AVAILABLE COPY

PATE	NT APPLICAT	ON FEE C	ETERMINA	TIO	V RECOR	of information	unless it	displays	a valid Ol	AB control r
Substitute for Form PTO-875							_ /	Application or Pockel Number		
APP	LICATION AS F	ILED - PAF	RTI		_					
(Cotu		1) (Column 2)		_	SMALL ENTITY		•	OR	OTHER THAN SMALL ENTITY	
FOR BASIC FEE (37 CFR 1.16(a), (b), or (c))	NUMBER FIL	EO ·	· NUMBER EXTRA		RATE (\$) FEE		5)	RATE (5)		
SEARCH FEE (37 CFR 1.16(k), (0), or (m))	<del> </del>			4					WIE (3)	FEE
EXAMINATION FEE	<del> </del>			4				Γ		
TOTAL CLAIMS (37 CFR 1.16(1))				4	<u></u>					1 "
INDEPENDENT CLAIMS (37 CFR 1.16(h))		20 -		4	×		_]。	R X		
	If the specification	on and drawin	QS exceed 100	4	×	·		×		
APPLICATION SIZE* FEE . (37 CFR 1.16(s))	sheets of paper, is \$250 (\$125 for additional 50 she	une application	n size fee due							
	30.0.0.41(8)	1)(G) and 37	n thereof. See CFR 1.16(s).			1	ł	1		
MULTIPLE DEPENDENT C				7 1		1	7			┼
If the difference in column	1 is less than zero, e	nter *0* in colu	nn 2.	_ ,	TOTAL	<del>                                     </del>	4			
APPLICAT	TON AS AMEND	ED - PART	. 11		·	<u> </u>	<b>-</b> J	T	OTAL	
	umn 1)	(Column 2								
8/n/ ci	AIMS IAINING	HIGHEST	1	1 [		ENTITY	OF	·	OTHER SMALL I	THAN ENTITY
Total	FTER NOMENT	NUMBER PREVIOUSL' PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL		· RA	TE (\$)	· ADDI-
5 (37 CFR 1.15(1)) Independent	8 Minus	20	-	H	25.	FEE (\$)	┽	H		FEE (\$
(37 CFR 1.96(h))	Minus	<u></u>		ᆄ	100 :		OR		0 -	
Application Size Fee (37 CFR 1.16(s))			-	100 =		OR	× 5	∞ -		
FIRST PRESENTATION OF	MULTIPLE DEPENDE	NT CLAIM (37 C	FR 1.16(j))				1	<del> </del>		
					OTAL DD'L FEE		OR	TOTAL	-+	
(Colum		(Column 2)	(Column 3)	^	DOCTEE [		OR	ADD'L	FEE	
131/06 REMA	INING	HIGHEST NUMBER	PRESENT		RATE (\$)		]			
Total .	MENT Minus	PREVIOUSLY PAID FOR	EXTRA	L	CATE (3)	ADDI- TIONAL FEE (\$)		RATE	(\$)	ADDI- TIONAL
Independent (37 CFR 1.16(n))	) Minus	20	- /	×	=		Ø₽.	×	-	FEE (\$)
Application Size Fee (37	<b>-</b>	3		×			OR	<u>~</u>	<del>/</del>	
FIRST PRESENTATION OF A		CLAIN (27.00)		F	$\dashv$	/	~			
		(37 CF)	x 1.16())	L		<i>U</i>	OR	<u> </u>		
If the entry in column 1 is less than the entry in column 2, write "o" in column 3.  If the "Highest Number Previously Paid For IN THIS SPACE is the column 3.					TAL D'L FEE		OR.	TOTAL ADD'L FI		
				er "20	. <b>-</b>				· L	
The "Highest Number Previdencial of information is re	ously Paid For (Tota	I or independent	less than 3, enter	. "3".	e formet					

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.